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APPLICANTS

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\*\* CONTINUING DATA ..... *None*

\*\* FOREIGN APPLICATIONS ..... *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY SINGAPORE	SHEETS DRAWING 3	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 2
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35 USC 119 (a-d) conditions met  
☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged  
 Examiner's Signature: *[Signature]* Initials: *[Initials]*

ADDRESS  
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TITLE  
 Inkjet capping elevator

FILING FEE  RECEIVED 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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